

Congress of the United States
House of Representatives
Washington, DC 20515-1317

June 26, 2020

Thomas J. Engels
Administrator
Health Resources and Services Administration
5600 Fishers Lane
Rockville, MD 20857

Dear Administrator Engels:

I write to request that the Health Resources and Services Administration (HRSA) do more to increase the number of Behavioral Health Workforce Education and Training (BHWET) trainees from rural areas and increase the number of grantees that serve these communities.

As you know, BHWET is designed to increase the health workforce across the country through providing grants to health professional school grantees that—among other things—offer stipends to students who agree to do internships or field placement programs at mental and behavioral health clinical sites. Unfortunately, statistics show that a limited number of BHWET trainees and grantees serve rural communities.

According to HRSA, in the 2017 – 2018 academic year, only 27.2% of BHWET trainees were from rural communities, only 24.6% of BHWET clinical sites were in rural settings and only 19.7% of BHWET trainees were receiving training in rural locations. These statistics are concerning because providers that come from rural areas or train in rural communities are more likely to return to those communities to practice.

Additionally, given the lack of mental health providers in these communities, more must be done. According to the National Institute of Mental Health (NIMH), more than 60% of rural Americans live in mental health professional shortage areas and more than 65% receive their mental health care from a primary care provider. Additionally, more than 90% of all psychologists and psychiatrists work exclusively in metropolitan areas.

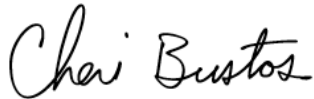
These shortages are especially concerning as the mental health of numerous Americans across the country are being negatively impacted by COVID-19. In a recent Kaiser Family Foundation poll, 45% of adults in the United States reported that their mental health has been negatively impacted due to worry and stress over the virus. 28% of people experiencing significant disruption in their lives due to coronavirus reported major negative mental health impacts.

More must be done to bolster the number of mental and behavioral health professionals in these underserved locations. As such, I have the following questions:

1. What barriers exist that prevent BHWET grants being awarded to potential grantees that serve rural areas? How is HRSA working to break down these barriers?
2. What outreach does HRSA perform to advertise the BHWET program to health professional schools in cities with a population lower than 200,000?
3. Of eligible health professional schools located in cities with a population below 200,000, how many applied for the BHWET program for the 2017 and 2018 school year?

Thank you for your consideration of this important request. More must be done to bolster the mental health workforce in rural areas. I look forward to your response.

Regards,

A handwritten signature in black ink that reads "Cheri Bustos". The signature is written in a cursive, flowing style.

Cheri Bustos
Member of Congress